

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000004742

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA CREDITORS BAR ASSOCIATION, INC.

**Current Principal Place of Business:**

4417 BEACH BOULEVARD  
SUITE 400  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 47718  
JACKSONVILLE, FL 32247

**New Mailing Address:**

**FEI Number:** 27-1898336

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RUBIN & DEBSKI, P.A.  
4417 BEACH BOULEVARD  
SUITE 400  
JACKSONVILLE, FL 32207 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: DEBSKI, MICHAEL  
Address: 4417 BEACH BLVD., STE 400  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D  
Name: WALTERS, ALLISON  
Address: 103 SOUTH BLVD.  
City-St-Zip: TAMPA, FL 33606

Title: D  
Name: LAVRAR, FLYNN  
Address: 1045 SOUTH UNIVERSITY DRIVE SUITE 202  
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL THIEL DEBSKI

D

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date